

County

LOCAL DRUG FREE COMMUNITIES FUND INFORMATION

(1) Amount deposited into the drug-free communities fund during the most recent, complete calendar year, per the County Auditor:

- The County Auditor's office deposited _____ into the LCC's Drug-Free Community Fund from fees collected last calendar year, _____.
- _____ rolled over from unused funds from the previous years.
- _____ total amount available for programs and administrative costs for the upcoming calendar year.
- _____ approved for administrative costs leaving _____ available for the upcoming year for programming

(2) Funding approval by category, including a brief description of the purpose of the grant funding which includes what will be purchased with the funds and indicate if the program is evidence-based:

[illegible]

TOTAL(S)			
Treatment/Intervention	AMOUNT REQUESTED	AMOUNT GRANTED	Evidence- Based Program
TOTAL(S)			
Criminal Justice Services	AMOUNT REQUESTED	AMOUNT GRANTED	Evidence- Based Program
TOTAL(S)			

- (3) Total amount of dollars approved (including previous annual deposit and all unused/rolled over dollars) and dollars awarded (percentages included):

CATEGORY	Percentage of Dollars Approved	Dollars Approved	Percentage of Dollars Awarded	Dollars Awarded
Prevention/Education				
Treatment/Intervention				
Criminal Justice Services				
Administrative				
TOTAL(S)	100%			

- (4) Describe the grant process and requirements for the grantees:

- (5) Provide administrative expenses (be specific):

EXPENSE	COST
<i>Examples: Coordinator's Salary</i>	<i>\$28,000</i>
<i>Mileage: Meetings, Conferences</i>	<i>\$232.77</i>
<i>Conference Registration</i>	<i>\$387.05</i>
<i>Office Supplies: Paper, Scissors, Printer Ink Cartridge, Pens</i>	<i>\$185.46</i>
TOTAL(S)	

- (6) Provide summary explanation of amount of any unused dollars from previous years:

- (7) Additional Comments:

